(e) if so, which are those programmes and Government's reaction thereto; and

(f) the parameters of evaluation/social audit etc. for the National Rural Health Mission and other health programmes in the country alongwith the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANAB AKALAKSHMI): (a) to (f) The National Rural Health Mission (NRHM) is an overarching umbrella initiative for establishing a functional, community owned, decentralized health delivery system with their sectoral convergence at all levels.

The NRHM has in built protocols for financial and physical monitoring and evaluation. All constituents of NRHM have pooled their resources and an integrated MIS has been operationalised to facilitate the process.

The parameters which are subject matter of evaluation/social audit include physical upgradation of facilities, improvements in availability of equipments, logistics and management, improved availability of human resources along with change in range and quality of service delivery at various levels. The progress on these parameters is benchmarked against baseline facility surveys. Community monitoring and concurrent external evaluations provide valuable inputs for triangulating the in house data and results of periodic thematic surveys.

The Mission Steerting Group (MSG) of NRHM, comprises Union Ministers who are incharge of key determinants of health. Independent Public Health Experts of eminence are also members of this group. The sessions of MSG are forums for evaluation of progress of NRHM. Similar mechanism also exists at the state level.

The Mentoring Group on ASH A and Advisory Group on Community Action (which have been constituted with leading NGOs as members) and the Regional Resource Centres are key institutions engaged in concurrent evaluation of NRHM.

Many of the key strategies under NRHM like ASHA and JSY have also been evaluated with assistance of external agencies. The fidelity of financial processes in some of the states have also been evaluated.

A Common Review Mission (CRM) was also undertaken during November 2007 where independent teams went to 13 representative States, visited health facilities and interacted with community organizations. The reports of the CRM have been widely shared.

All the States have established institutional framework of NRHM and started operationalisation of various strategies. The capacities of all States for training and management are being augmented on priority and progress against key indicators is being monitored.

The World Bank has undertaken a detailed implementation review of five health sector projects which were being implemented during periods varying from 1997 till 2006 end. Certain deficiencies have been highlighted in the report in relation to programmes including HIV/ AIDS, Revised National Tuberculosis Control Programme, Orissa Health System Project etc.

To address the systemic deficiencies pointed out in the World Bank report relating to procurement, implementation and oversight a Joint Action Plan has been finalised after intensive discussions with the World Bank keeping in mind specific interventions and timelines.

Chikungunya in the country

858. DR. VIJAY MALLYA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the total number of chikungunya cases reported, so far;

(b) the steps taken by Government to tackle chikungunya;

(c) the amount of funds allocated to States affected by the disease;

(d) the utilization of the sanctioned funds by Karnataka; and

(e) the preventive steps taken to prevent re-occurrence of chikungunya?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) 56355 total suspected cases of Chikungunya fever have been reported form the States during the year 2007 and 62 cases during the year 2008 (upto Februrary 27th).

(b) Government of India has taken following steps to prevent and control Chikungunya;

- A long Term Action Plan for early case reporting 7 management Entomological surveillance and anti mosquito measures for prevention and control of Dengue & Chikungunya in the country has been sent to the State(s) for implementation.
- Guidelines on clinical management sent to the States.
- Identified 13 Apex Referral Laboratories (ARLs) for advanced diagnosis and regular surveillance of Chikungunya.
- IgM ELISA test kits have been supplied to ARL & SSHs.
- Contingency grant made available to meet the operational cost of the Sentinel Surveillance hospitals and Apex referral Laboratories.
- Supply of additional logistics like larvicides and adulticides in affected States.
- Intensified Information Education & Communication (IEC)/Behaviour Change Communication (BCC) activities.
- Field visits by the officers of National Vector Borne Disease Control Programme (NVBDCP)/Dte. General of Health Services/Ministry of Health & Family Welfare and Central teams to provide technical guidance.
- Released Rs. 2160.46 lakhs to the affected States during 2006-07 as emergency package for prevention and control of Chikungunya and Rs. 875.31 lakhs during the year 2007-08.

(c) The Stated wise funds released during the year 2006-07 and 2007-08 is enclosed as statement. *(See* below)

(d) The State of Karnataka had utilized Rs. 9.48 lakhs out of Rs. 220.50 lakhs released during the year 2006-07.

(e) The following steps are taken: